UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL				
OMB Number: Expires: Estimated averag hours per form	3235-0076 May 31, 2007 e burder ,1.00			

Name of Offering (check if this is an amendment and name has changed, and indicate change.) ML-Silver Lake III (Offshore), L.P. (the "Issuer")	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) UEOE CECETATION Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA < MAR 1 6 2007	
1. Enter the information requested about the issuer	<u>~</u>
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) ML- Silver Lake III (Offshore), L.P.	
Address of Executive Offices (Number and Street, City, State, ZIP Code) Telephone Number (Including Area-Code)	
c/o ML Private Equity Offshore Ltd., Walker House, 87 Mary Street, George Town, Grand Cayman, (345) 945-3727 KY1-9002 Cayman Islands	<u> </u>
Address of Principal Business Operations (Number and Street, City, State, ZIP Code) Telephone Number (Including Area Code)	
(if different from Executive Offices)Merrill Lynch Alternative Investments LLC, Princeton Corporate (866) 637-2587	
Campus, 800 Scudders Mill Road, Section 2G, Plainsboro, New Jersey 08536	
Brief Description of Business ML-Silver Lake III (Offshore), L.P. is a Cayman Islands exempted limited partnership that has been organized invest in Silver Lake Partners III, L.P., a Delaware limited partnership that seeks to achieve superior returns by pursuing large-scale private equinvestments in companies within the technology, technology-enabled, and related growth industries.	
Type of Business Organization PROCESSE	= n
corporation Imited partnership, already formed other (please specify):	בט
business trust limited partnership, to be formed	
Month Year MAR 2 U 2007	ſ
Actual or Estimated Date of Incorporation or Organization:	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) FN FINANCIAL	

GENERAL INSTRUCTIONS

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA							
2. Enter the information requested for the following:							
• Each promoter of the issuer, if the issuer has been organized within the past five years;	• Each promoter of the issuer, if the issuer has been organized within the past five years:						
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; 							
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and							
Each general and managing partner of partnership issuers.							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner/						
Full Name (Last name first, if individual) ML Private Equity Offshore Ltd. (the "General Partner")							
Business or Residence Address (Number and Street, City, State, Zip Code) Walker House, 87 Mary Street, George Town, Grand Cayman, KY1-9001 Cayman Islands							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director/Manager General and/or of General Partner Managing Partner						
Full Name (Last name first, if individual) Olgin, Steven B.							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o ML Private Equity Offshore Ltd., Walker House, 87 Mary Street, George Town, Grand	Cayman, KY1-9001 Cayman Islands						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director/Manager General and/or of General Partner Managing Partner						
Full Name (Last name first, if individual) Alderman, Robert M.							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o ML Private Equity Offshore Ltd., Walker House, 87 Mary Street, George Town, Grand	Cayman, KY1-9001 Cayman Islands						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer of General Partner							
Full Name (Last name first, if individual) Castano, Christopher							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o ML Private Equity Offshore Ltd., Walker House, 87 Mary Street, George Town, Grand	Cayman, KY1-9001 Cayman Islands						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer of General Partner	- -						
Full Name (Last name first, if individual) Walkers SPV Limited							
Business or Residence Address (Number and Street, City, State, Zip Code) Walker House, 87 Mary Street, George Town, Grand Cayman, KY1-9001 Cayman Islands							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner						
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)	, , , , , , , , , , , , , , , , , , , ,						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

-					В	. INFORM	IATION A	BOUT OF	FERING					
										•			YES	NO NO
					Answer a	ilso in App	endix, Colu	ımn 2, if fili	this offering ing under U	LOE.				\boxtimes
2. W	/hat is	the min	imum inves	tment that	will be acc	epted from	any individ	dual?	**************			•••••	\$250,0	00
													YES	NO
3. D	oes th	e offerin	g permit joi	nt owners	hip of a sin	gle unit?						***************************************	\boxtimes	
4. E	nter th	e inform	ation reque	sted for ea	ch person v	who has be	en or will b	e paid or gi	ven, directly	y or indirec	tly, any co	mmission		
lis of	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Name	e (Las	t name f	irst, if indiv	idual)							-			
Merrill	Lvne	h Pierc	e, Fenner &	Smith I	ncorn or ete	d								
			Address (Nu				Code)			··				- ,
Merrill	Lync	h World	l Headquar	ters, 4 W	orld Finan	cial Cente	r, New Yo	rk, New Yo	rk 10080					
			ker or Deal				,	<u> </u>			<u> </u>			
States in 1	Which	Person	Listed Has	Solicited o	or Intends to	Solicit Pu	rchasers							
			or check in			•						🛛 A	II States	
[AL]		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
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[MT]]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]	
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	e (Las	t name f	irst, if indiv	idual)										
Business	or Res	sidence A	Address (Nu	mber and	Street, City	. State. Zin	Code)							 -
2-23					, ,	,,	,							
Name of	Assoc	iated Bro	oker or Deal	ler										-
Traine of 2	713300	iaico Di	ores of Deal											
States in 1	Which	Person	Listed Has	Solicited o	or Intends to	Solicit Pu	rchasers							
													All State	s
(A	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]	
[II]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
-	1T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	(ND)	[OH]	[OK]	[OR]	[PA]	
[R		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	e (Las	t name f	irst, if indiv	idual)										
Business	or Res	sidence A	Address (Nu	mber and	Street, City	, State, Zip	Code)							
Name of a	Assoc	iated Bro	oker or Deal	ler									· · · · · ·	
States in 1	Which	Person	Listed Has	Solicited o	or Intends to	Solicit Pu	rchasers						 -	
			es" or check					******************					All State	s
(O		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL	_]	[IN]	[IA]	(KS)	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
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[R	η	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pric	e	Amount Already Sold
	Debt	\$0		\$0
	Equity	\$0		\$0
	Common Preferred			
	Convertible Securities (including warrants)	\$0	_	\$0
		50		\$0
		\$ 97,010,000 (b)		\$97,010,000
		\$ 97,010,000 (b)		\$97,010,000
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	144		\$97,010,000
	Non-accredited investors	0		\$0
	Total (for filings under Rule 504 only)	N/A		N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			Dollar Amount
	Type of offering	Security		Sold
	Rule 505	N/A		N/A
	Regulation A	N/A		N/A
	Rule 504	N/A		N/A
	Total	N/A		N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		_	
	Transfer Agent's Fees	_		\$3,000
	Printing and Engraving Costs	_		\$65,000
	Legal Fees	_		\$200,000
	Accounting Fees			\$0
	Engineering Fees	_	_	\$ 0
	Sales Commissions (specify finders' fees separately) (paid by subscribers, not by issuer)		⅓	\$922,750
	Other Expenses (identify) Marketing Expenses		\boxtimes	\$20,000
	Total		Ճ	\$1,210,750
(a) (b)	Amounts represent Capital Commitments for Interests. Interests represent funded Capital Commitments. A designated as either "Class I Interests", "Class D Interests" or "Class A Interests." Any investor with a Capital less than \$5,000,000, will be assigned Class I Interests in the Issuer; any investor with a Capital Commitmassigned Class D Interests; and all other investors will be assigned Class A Interests. Those investors who ar Interests may not be assessed a placement fee. Estimated maximum aggregate offering amount. Estimated maximum aggregate sales commission to be paid to properly registered selling agents. These amounts are considered to properly registered selling agents.	ital Commitment nent of \$5,000,00 e assigned Class	of: 0 or I In	\$3,000,000 or more, more will be terests or Class D

the Issuer.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS
b.	Enter the difference between the aggregate offering price given in response to Part C - Question 1 and

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceed proceeds to the issuer."

\$95,799,250

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.

	Payments t Officers, Directors, o Affiliates	
Salaries and fees.	\$0	\$0
Purchase of real estate	\$ 0	5 0
Purchase, rental or leasing and installation of machinery and equipment	\$ 0	so
Construction or leasing of plant buildings and facilities	\$ 0	so
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$ 0	□ so
Repayment of indebtedness		☐ so
Working capital (reserves for working capital expenses)		\$6,299,250
Other (specify): Portfolio Investments	\$0	\$89,500,000
Column Totals	\$0	\$93,999,250
Total Payments Listed (column totals added)	\$95,7	799,250

D. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signed signature constitutes an undertaking by the issuer information furnished by the issuer to any non-active signature.	by the undersigned duly authorized person. If this to furnish to the U.S. Securities and Exchange Concredited investor pursuant to paragraph (b)(2) of Ru	nmission, upon written request of its staff, the			
Issuer (Print or Type)	Signature	Date			
ML-Silver Lake III (Offshore), L.P.	April Com	3/14/07			
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
Christopher Castano	Director of ML Private Equity Offsh	ore Ltd., the General Partner			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

